Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	5-12-08	Address:	OLD HENDERSON & SEMINA
Case #;	35F27734)		<u>EUANSULUE</u>
County:	<u>Vanderburgh</u>		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
N Chemic	onal Lab al/Glassware/Equipment (only) te (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel Topen – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Rcd Phosphorous/Iodine Reaction(s):			
Flammable Solvents;			
Water Reactive Metal (Lithium): 7º AOLD AY			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s): ZagovA7			
Corrosive Acid: LONDUR7			
Corrosive Base:			
Other (item and location):			
Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services		Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other: TMF//C SVP	
- '			
This report is to be faxed to the following agencies that serve the location:			
Fire Department: Evansville FD		Fax: <u>435-6</u> Fax: 435-5	
Health Department: Vanderburgh Co.		Fax:	
Child Protec	etion Service:		
For further information regarding this methamphetamine laboratory, contact			

For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Trp. Doug Humphrey</u> Phone <u>812 867 2079</u>

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.